

SUGGESTED CHECKLIST FOR USE BY LOCAL INSPECTORS

Date of Manufacture: _____

Wind Zone: _____

Thermal (U/O Value): _____

HUD Label: _____

Specifications for Set-Up: State Code _____ Manufacturer's Installation Instructions _____

Over-Height Home: _____

Positive Drainage: _____

Vegetation Under Home Cut to Maximum of 2" Above Grade: _____

All Sod, Stumps, and Organic Materials Removed from Footing Areas: _____

Construction Debris Removed Under Home: _____

Soil Bearing Capacity: _____

Footings: Solid Blocks _____ Pour-in-Place Concrete _____ ABS Pads or other Listed and Labeled Material _____

Footing Size: _____ Footing Depth: _____

Pier Spacing: _____ Pier Height: _____ Single Stacked Piers: _____ Double Stacked Piers: _____

Cap Blocks: _____ Wedges: _____

Marriage Line Pier Location (if required): _____ Perimeter Pier Location (if required): _____

Torque Value of Soil: _____

Anchor Manufacturer: _____ Anchor Model: _____

Anchor Installation: Direct Pull _____ Angled Pull _____ Rock Anchor _____ Concrete Cylinder _____

Stabilizer Plates (if required) _____ Anchor Head Exposed: _____

Approved Tie Strap Material: _____ Strap Angle: _____

Marriage Line Connections: Floor _____ Roof _____ End Walls _____ Ceiling _____

Access to Crawl Space: _____ Tears in Bottom Board Repaired: _____

Skirting Foundation: _____ Skirting Material: _____ Crawl Space Ventilation: _____ Vapor Retarder: _____

Clothes Dryer Vented to Outside: _____

Proper Installation of Crossover Ducts: _____

Utility Connections: Electrical _____ Water Supply _____ DWV System _____ Gas _____

Smoke Detectors: _____

Steps, Landings, Etc.: _____